

## LEGISLATIVE ACTION

Senate House

Floor: 5/AD/2R 04/23/2009 05:23 PM

Senator Gaetz moved the following:

## Senate Amendment (with title amendment)

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Between lines 830 and 831 insert:

Section 13. Section 409.91207, Florida Statutes, is created to read:

409.91207 - Medical Home Pilot Project.--

(1) The agency shall develop a plan to implement a medical home pilot project that utilizes primary care case management enhanced by medical home networks to provide coordinated and cost-effective care that is reimbursed on a fee-for-service basis and to compare the performance of the medical home

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networks with other existing Medicaid managed care models. The agency is authorized to seek a federal Medicaid waiver or an amendment to any existing Medicaid waiver, except for the current 1115 Medicaid waiver authorized in s. 409.91211, as needed, to develop the pilot project created in this section but must obtain approval of the Legislature prior to implementing the pilot project.

- (2) Each medical home network shall:
- (a) Provide Medicaid recipients primary care, coordinated services to control chronic illness, pharmacy services, specialty physician services, and hospital outpatient and inpatient services.
- (b) Coordinate with other health care providers, as necessary, to ensure that Medicaid recipients receive efficient and effective access to other needed medical services, consistent with the scope of services provided to Medipass recipients.
- (c) Consist of primary care physicians, federally qualified health centers, clinics affiliated with Florida medical schools or teaching hospitals, programs serving children with special health care needs, medical school faculty, statutory teaching hospitals, and other hospitals that agree to participate in the network. A managed care organization is eligible to be designated as a medical home network if it documents policies and procedures consistent with subsection (3).
- (3) The medical home pilot project developed by the agency must be designed to modify the processes and patterns of health care service delivery in the Medicaid program by requiring a medical home network to:

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- (a) Assign a personal medical provider to lead an interdisciplinary team of professionals who share the responsibility for ongoing care to a specific panel of patients.
- (b) Require the personal medical provider to identify the patient's health care needs and respond to those needs either directly or through arrangements with other qualified providers.
- (c) Coordinate or integrate care across all parts of the health care delivery system.
- (d) Integrate information technology into the health care delivery system to enhance clinical performance and monitor patient outcomes.
- (4) The agency shall have the following duties, and responsibilities with respect to the development of the medical home pilot project:
- (a) To develop and recommend a medical home pilot project in at least two geographic regions in the state that will facilitate access to specialty services in the state's medical schools and teaching hospitals.
- (b) To develop and recommend funding strategies that maximize available state and federal funds, including:
- 1. Enhanced primary care case management fees to participating federally qualified health centers and primary care clinics owned or operated by a medical school or teaching hospital.
- 2. Enhanced payments to participating medical schools through the supplemental physician payment program using certified funds.
- 3. Reimbursement for facility costs, in addition to medical services, for participating outpatient primary or specialty



clinics.

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- 4. Supplemental Medicaid payments through the low-income pool and exempt fee-for-service rates for participating hospitals.
- 5. Enhanced capitation rates for managed care organizations designated as medical home networks to reflect enhanced fee-forservice payments to medical home network providers.
- (c) To develop and recommend criteria to designate medical home networks as eligible to participate in the pilot program and recommend incentives for medical home networks to participate in the medical home pilot project, including bonus payments and shared saving arrangements.
- (d) To develop a comprehensive fiscal estimate of the medical home pilot project that includes, but is not limited to, anticipated savings to the Medicaid program and any anticipated administrative costs.
- (e) To develop and recommend which medical services the medical home network would be responsible for providing to enrolled Medicaid recipients.
- (f) To develop and recommend methodologies to measure the performance of the medical home pilot project including patient outcomes, cost-effectiveness, provider participation, recipient satisfaction, and accountability to ensure the quality of the medical care provided to Medicaid recipients enrolled in the pilot.
- (g) To recommend policies and procedures for the medical home pilot project administration including, but not limited to: an implementation timeline, the Medicaid recipient enrollment process, recruitment and enrollment of Medicaid providers, and

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the reimbursement methodologies for participating Medicaid providers.

- (h) To determine and recommend methods to evaluate the medical home pilot project including but not limited to the comparison of the Medicaid fee-for service system, Medipass system, and other Medicaid managed care programs.
- (i) To develop and recommend standards and designation requirements for a medical home network that include, but are not limited to: medical care provided by the network, referral arrangements, medical record requirements, health information technology standards, follow-up care processes, and data collection requirements.
- (5) The Secretary of Health Care Administration shall appoint a task force by August 1, 2009, to assist the agency in the development and implementation of the medical home pilot project. The task force must include, but is not limited to, representatives of providers who could potentially participate in a medical home network, Medicaid recipients, and existing Medipass and managed care providers. Members of the task force shall serve without compensation but are entitled to reimbursement for per diem and travel expenses as provided in s. 112.061.
- (6) The agency shall submit an implementation plan for the medical home pilot project authorized in this section to the Speaker of the House of Representatives, the President of the Senate, and the Governor by February 1, 2010. The implementation plan must include any approved waivers, waiver applications, or state plan amendments necessary to implement the medical home pilot project.



- (a) The agency shall post any waiver applications, or waiver amendments, authorized under this section on its Internet website 15 days before submitting the applications to the United States Centers for Medicare and Medicaid Services.
- (b) The implementation of the medical home pilot project, including any Medicaid waivers authorized in this section, is contingent upon review and approval by the Legislature.
- (c) Upon legislative approval to implement the medical home pilot project, the agency may initiate the adoption of administrative rules to implement and administer the medical home pilot project created in this section.

========= T I T L E A M E N D M E N T ========== And the title is amended as follows:

Delete line 53

144 and insert:

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the overutilization of Medicaid services; creating s. 409.91207; requiring the agency to develop a plan to create a medical home pilot project; providing waiver authority for the agency; providing an exception; requiring each medical home network to provide specified services; providing responsibilities of the agency; requiring the Secretary of the agency to appoint a task force; requiring the agency to submit a medical home implementation plan; specifying that implementation of the medical home pilot project is contingent upon legislative approval; authorizing the agency to develop rules; amending s.